

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

1. County of Gila

District of _____

Town of Miami

or

City of _____

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 178County Registrar No. 634

Local Registrar No. _____

No. 10 Porto Rico Canon Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)2. Full name of child Florencia Reyes { If child is not yet named, make supplemental report, as directed.3. Sex of Child Female To be answered ONLY In event of plural births. 4. Twin, triplet or other. 5. No., in order of birth. 6. Legitimate? yes 7. Date of birth Apr. 29, 1921
Month Day Year8. FATHER
Full name Jesus Reyes
9. Residence (Usual place of abode) Miami, Arizona
If non-resident, give place and state.
10. Color or race Mex.
11. Age at last birthday 35 (Years)14. MOTHER
Full maiden name Josepha Gansata
15. Residence (Usual place of abode) Miami, Arizona
If non-resident, give place and state.
16. Color or race Mex.
17. Age at last birthday 25 (Years)12. Birthplace (city or place) Guanajuato
(State or country) Mex.
13. Occupation
Nature of Industry Laborer18. Birthplace (city or place) Sonora,
(State or country) Mex.
19. Occupation
Nature of Industry Housewife20. Number of children of this mother { (a) Born alive and now living 4
(Taken as of time of birth of child herein certified and including this child.) (b) Born alive but now dead
(c) Stillborn. 21. Were precautions taken against ophthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was born at S.P. on the date above stated

* When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Signature Cyril M. Cron M.D. (Physician or midwife).Address Miami, Ariz.

Given name added from a supplemental report.

Month, day, year

Filed June 2, 26 B.S. Imm Local Registrar.

Filed _____, 19____ County Registrar.

Registrar

692-429-171